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Calomel in Chronic Rheumatism

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Chapman

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The use of Calomel in Chronic Rheumatism

Among the many erroneous doctrines entertained in the infancy of medicine with regard to the theory and treatment of diseases, there were none founded on more false principles than those with regard to Rheumatism. For a long time there was no distinction made between Gout and Rheumatism. All diseases of the joints were distinguished by the name of arthritis whether the pain arose from a rheumatic inflammation or from what is now called Gout. Afterwards physicians considered all pains in the joints that were not plainly Gout as the effect of a rheum or catarrh. This change of theory instead ~~of instead~~ of improving their practice had the contrary effect for all catarrhous humors were supposed to be of a cold nature and bleeding was forbid; and the cure of acute rheumatism as well as Gout was attempted without bleeding. To Bottallus may be ascribed the honor

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of dissipating this idle theory and distinguishing the inflammatory state of these diseases from the chronic, and recommends bleeding in the acute state of both. This practice has been followed by the ablest writers of every succeeding age - Cullen defines Rheumatism to be "Morbus ab externa et plerumque evidente causa; pyrexia, dolor circa articulos, musculorum tractum sequens; genua et reliquos magnos, potius quam pedum vel manum, articulos infestans, calor externa auctus. - Rheumatism is classed among the Phlegmasiæ, although it is characterised by a peculiar action and a distinct termination - very seldom if ever terminating in suppuration - Rheumatism is divided into species the Acute and Chronic or according to Dr Chapman more properly the Sonic and Atonic. Most practitioners concur in considering them not as distinct diseases, but as different stages of the same disease - It is homen of no practical importance as Acute rheumatism is attended with fever and

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chronic is not. As the treatment of the two species of the disease is very different, the proper limits should be carefully marked. When the pains are still ready to shift their place; when they are especially severe in the night time, when at the same time they are attended with some degree of pyrexia and with some swelling and especially with some redness of the joints; the disease is ~~still~~ to be considered as still partaking of the nature of acute rheumatism. But when there is no degree of pyrexia remaining, when the pained joints are without redness; when they are cold and stiff; when they cannot be easily be made to sweat; or while a free and warm sweat is brought on the rest of the body, it is only clammy and cold on the pained joints; and when especially the pains of these joints are increased by cold and relieved by heat applied to them; the case is to be considered as that of purely chronic rheumatism*. Rheumatism is much allied to Gout and cannot always be discriminated.

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from it - Rheumatism has an exciting cause as cold, it has no preceding cause as Gout has - Gout affects the smaller joints, Rheumatism the larger - Rheumatism is not characterised by that bright inflammatory affection which usualy attends Gout - Both remit - but Gout is regular in its exacerbation, Rheumatism is not - Gout proceeds from and is accompanied with a disease of the stomach, Rheumatism seldom if ever is - No disease is more varied in its attacks than Rheumatism - Most commonly it affects the joints of the extremities - When the hips are its seat it is called Sciatica when it attacks the back or loins it is called Lumbago The skin is also sometimes subject to it - It has been considered a centrifugal disease, from which quality the distinction has been drawn between it and arthritic affections - Rheumatism however occasionaly attacks some of the viscera; not unfrequently the alimentary canal or liver, and sometimes even the heart itself - The heredita

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nature of this disease is not yet well established in deed even by some entirely denied. The advocates in favour of its not being hereditary assert that if exposed to its exciting cause most persons will be attacked with this disease. This is the case, but they cannot deny that some of them will be affected much sooner and more severely than others. Is it because they are of a weaker constitution? It will be found that the robust as well as the weak suffer from it. It cannot be accounted for in any other way than by considering the disease as hereditary. By supposing that they are constitutionally predisposed to it and possess an organization of parts peculiarly susceptible of the morbid action in which the disease consists. If pulmonary complaints are hereditary and affect those children who resemble their parents in the form of their chest; if manifestly gouty, scrofula affect most readily those children whose form and face resemble their parents who have

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been afflicted with these diseases, are allowed to be hereditary diseases. If therefore Rheumatism prevails in some families more than others and if it attacks those who by similarity of joints and muscles resemble their parents, why then may it not be considered hereditary. There can not be an objection of any weight against its not being so. The similarity of Gout and Rheumatism is so great, that there is not one argument in favour of Gout being hereditary that cannot with equall propriety be applied to Rheumatism.

Having shown the difference between acute and Chronic rheumatism, and the manner of discriminating between Gout & Rheumatism; also the hereditary nature of rheumatism I proceed to consider more minutely the subject of this dissertation viz The use of Calomel in Chronic Rheumatism (Arthrodynia). "Post rheumatismum risum videntur, vel subluxationem, dolores articuli vel musculorum, sub motu

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presentium, aut tempus minuse fugaces, calor
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di facile et sape sponte progessentes - pyrexia nulla,
tumor flexumque nullus - The cause of purely
chronic rheumatism is supposed to be a debili
ty of the parts affected accompanied with slow
inflammation; and with a rigidity and con
traction of the muscular fibres - Hence our prin
ciple view must be to restore the activity of the
vital principle in the part affected; to promo
te absorption of the effused fluids about the joints,
to remove the rigidity of the muscular fibres, and
generally produce a new action in them - The
remedies formerly recommended for the cure
of this disease were very inert and generally
insufficient, always slow in their action, and al
most as troublesome to the patient as the dise
ase itself - Almost all the heating & stimula-
ting articles of the Materia Medica have
been used - The Turpentines, Guiacum, the

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volatile alkaline salts, and all those substances which contain essential oils & resins have been the principle remedies - Under this manner of treatment, the disease was considered, as very difficult to cure and even by some as one of the opprobia medicorum -- Pringle considered it as a disease which was but rarely cured & and when any relief was obtained it was by the use of mercury - He denied that a salivation will cure chronic rheumatism, but recommends repeated doses of Calomel to be given at night and purged off the next morning - But his assertions are founded on false principles for calomel will not cure chronic rheumatism in any other way than by creating its own specific action on the system - Chronic rheumatism being a disease of debility it is seldom necessary to purge in it - If the disease is even cured by a scarlet fever supervening, it is not merely by the evacuation of facculant matter, but by a translation

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of the disease from the joints to the intestines
The correct plan of treatment in this disease by
the use of calomel may with great justness be as
cribed to Fothergill. In his work we find a case
of chronic rheumatism successfully treated
in this manner. "He says that after all the common
remedies had been applied (such as the Turpentines,
Guiacum the volatile Alkaline salts &c) administ
red by an able physician and the patient was
under the necessity of taking large doses of opium
to relieve his pains, he was cured by the use of Calomel
He continues "not finding any reason to suspect
either an internal abscess or a tendency to one
but that the seat of the pain was in the tendi
nous parts about the loins and deep seated I direc
ted calomel to be taken. As soon as the calomel
had produced its effect on the system. the pains ce
se abated and in a few weeks by continuing
this practice and by using gentle exercise he
was restored to his usual health. And he fur

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then states. "that he has seldom met with a case of genuine chronic rheumatism that has not yielded to this mode of treatment - Such testimony in favour of this mode of treating this disease from a Physician who has always ranked high among medical men; both as a man of liberal talents and of unquestionable veracity is no small recommendation in favour of it. Although this correct and easy plan of cure had been pointed out still it was only partialy followed. - It may be inferred from this that this practice was not successfull with other physicians But such was not the case, we find in almost every practice of medicine calomel recommended in this disease But it is a dernier resort when all others have failed - Instead of it we have different medicines that can have very little effect on the disease So this may be attributed the difficulty which was formerly experienced in curing this disease. During the last war

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ler I had an opportunity of seeing this practice pursued to a considerable extent at the Hospital in this place - There were a great many cases of very severe chronic rheumatism accompanied with great effusions around the joints. All were treated by the use of Calomel combined with opium and the application of the flannel roller and all were effectualy relieved. Dr Dorsey stated on the authority of Dr Otto that there was not one solitary instance of its having failed during the whole winter - There is no medicine in the Materia Medica which deserves more the epithet of the Magnum donum dei than Calomel; nor any one which is adequate to the relief of so many diseases to which suffering man is liable. The great efficacy of ~~[illegible]~~ Calomel in chronic diseases had long been known. It had been employed for the removal of all chronic complaints of of the viscera with astonishing succes - Physicians led by its great utility in these diseases

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and their analogy to the other chronic affections of the system, at length used calomel in chronic rheumatism. Their expectations were realised and they had the satisfaction of seeing another instance of the efficacy of this valuable remedy.

In advocating the use of calomel in chronic rheumatism as being indeed the only remedy on which complete reliance should be placed I am justified in it by the theory and nature of the disease. It is a diseased action of the parts affected, located in the ligaments and membranes of the joints, and accompanied sometimes with an enlargement of the extremities of the bones. It requires the most powerfull medicines to produce a change in the action of the parts affected. There is generaly some inflammation and often we find the pulse considerable excited. Indeed the membranes and ligaments of the joints are so inflamed

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that it requires local depletion to a considerable extent - In this case it is out of the question to administer those medicines which are generally recommended in this disease viz Lenpentines Guiacum & which increase the tenseness of the pulse, and which would only increase the disease - Although the action of Calomel on the system is stimulant - yet still that action in no way resembles that produced by other medicines - It possesses a specific action of its own which it impresses on the system - It overcomes the diseased action in the system by producing a new action which constitutes a disease and which is more powerfull than that which had before existed in the system - It is well established that no two diseases can exist in the same part of the system at the same time - We administer Calomel in this disease on this principle - The action which Calomel produces on the system is so much

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stronger than the disease itself; that it forces it to relinquish the hold it has on the system and in this manner cures the patient -
The remedies recommended for the cure of Chronic Rheumatism may be divided into General and Local - The general may be comprised in these two Calomel & Opium - The local Flannel bandages -
The calomel should be administered in doses sufficient to produce a gentle ptyalism, continued for a considerable time - When we wish to have calomel produce its greatest effect on the system we ought to administer the medicine in very small doses increasing it gradualy and continued for a considerable time While we are administering the calomel it will be proper to give small doses of Opium to relieve the pain which generally accompanies this complaint and prevent the calomel from purging - The patient should wear

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flannel next his skin; and if he be free from fever take during fine weather as much exercise as he can bear, even so as to produce perspiration, care being taken that he dont take cold.- The great efficacy of the flannel roller in this disease renders it indeed a power full auxilliary in obtaining a radical cure The credit of first using this remedy is undoubtable due to the present distinguished professor of the Theory and Practice of Medicine. It has also been claimed by Dr Balfour in the Edinburgh Medical and Surgical Journal but very unjustly. I can not help mentioning here the illiberality of the Physicians of the Continent. They ascribe all the improvements in medicine made by the American practioners to themselves. Instances are not wanting of their claiming many important improvement in Medicine made by the present able and learned Professor in our University.

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The affected parts should be bandaged with flannell rollers which should be applied equable & tightly. It supports the muscles of the part so as to prevent in them the sensation of fatigue, invigorates the parts assists the circulation and promotes perspiration. It produces in them a strong impression which produces a new action, which overcomes the morbid association in which the disease consists. Indeed the power of this remedy is so great, that I have known it remove the complaint when of a mild nature without the use of any other remedy. The diet should be nutritive but not too heating. Spirituous liquors should be used very sparingly. If these remedies fail and if the constitution be weakened change of climate or in some cases change of occupation may effect a cure. In Syphilitic rheumatism calomel is now generally used and with great success. Dr Chapmans recom

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mends very highly the Juniperus Sabina in this complaint - But not being able to procure it in the country I could not give it a trial in this complaint - But recommended on the high authority of Dr Chapman and sanctioned by his experience, there can not be a doubt but it is a valuable remedy. But it appears to me that Savin & Calomel are suited to different degrees of this complaint - When there is great inaction in the system with a considerable degree of coldness and deficiency of action on the surface of the body; then such a powerfull stimulas as the Savin might be used with great succes - But when the system possesses considerable vigor, when the pulse is strong and when the vessels of the surface continue their usual action then Calomel will be the proper remedy - Thus we may rank them both as valuable remedies in this disease -- By pursuing the practice here aid

vocated in this disease it will be found to be as easily removed as most diseases to which the human system is liable –

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Asclepias Syriaca

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